

## CJA 24 AUTHORIZATION AND VOUCHER TRANSCRIPT

1. CIR./DIST./DIV. CODE 0090		2. PERSON REPRESENTED JAMES THOMAS TAYLOR		VOUCHER NUMBER 0090.1581551	
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER 1:18-CR-00198-3-JEB		5. APPEALS DKT./DEF. NUMBER 23-3077	
6. OTHER DKT. NUMBER		7. IN CASE/MATTER OF (Case Name) USA v. MOORE et al		8. PAYMENT CATEGORY Capital	
9. TYPE PERSON REPRESENTED Adult Defendant		10. REPRESENTATION TYPE Federal capital prosecution, either trial or direct appeal		11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense</i> 18:1201.F, 18:924C.F	
REQUEST AND AUTHORIZATION FOR TRANSCRIPT					
12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED (Describe briefly) USA v. James T. Taylor, No 23-3077: No. 23-3072(L) D.C. Circuit					
13. PROCEEDING TO BE TRANSCRIBED (Describe specifically). NOTE: The trial transcripts are not to include prosecution opening statement, defense opening statement, prosecution argument, defense argument, prosecution rebuttal, voir dire or jury instructions, unless specifically authorized by the Court (see Item 14.) 03/11/2019 Arraignment; 08/05/2021 (Motions); 11/08/21 (Motions); 01/18/2022, 02/14/22, 02/23/22, 09/01/2022 (Status hearings); 09/19/22 (Jury); 10/26/22 (Deliberations) court reporter Lisa Griffith					
14. SPECIAL AUTHORIZATIONS				JUDGE'S INITIALS	
A. Apportioned 0% of transcript with (Give case name and defendant)					
B. <input type="checkbox"/> 14-Day <input type="checkbox"/> Expedited <input type="checkbox"/> 3-Day <input type="checkbox"/> Daily <input type="checkbox"/> Hourly Transcript <input type="checkbox"/> Realtime Unedited Transcript					
C. <input type="checkbox"/> Prosecution Opening Statement <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input type="checkbox"/> Jury Instructions					
D. In this multi-defendant case, commercial duplication of transcripts will impede the delivery of accelerated transcript services to persons proceeding under the Criminal Justice Act.					
15. ATTORNEY'S STATEMENT As the attorney for the person represented who is managed above, I hereby affirm that the transcript requested is necessary for adequate representation. I therefore request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Act.  _____ Signature of Attorney  _____ Printed Name 240-463-4625 Telephone: _____  _____ Date 06/25/2023 17:38:53				16. COURT ORDER Financial eligibility of the person represented having been established to the Court's satisfaction the authorization requested in item 15 is hereby granted.  _____ Signature of Presiding Judicial Officer or By Order of the Court  _____ Date of Order 07/03/2023 07:17:34 _____ Nunc Pro Tunc Date	
CLAIM FOR SERVICES					
17. COURT REPORTER/TRANSCRIBER STATUS <input checked="" type="checkbox"/> Official <input type="checkbox"/> Contract <input type="checkbox"/> Transcriber <input type="checkbox"/> Other				18. PAYEE'S NAME Lisa Walker Griffith MAILING ADDRESS (First Name, M.I., Last Name, Including any suffix). 5803 Sir Galahad Road Glenn Dale, MD 20769 Telephone: (301) 787-0448	
19. SOCIAL SECURITY OR EMPLOYER ID NUMBER OF PAYEE XX-XXXXXXX					
20. TRANSCRIPT	INCLUDE PAGE NUMBERS	NO OF PAGES	RATE PER PAGE	SUB TOTAL	LESS AMOUNT APPORTIONED
Original		422	\$4.00	\$1,688.00	\$0.00
Copy					
Expense (Itemize)					
TOTAL AMOUNT CLAIMED					\$1,688.00
21. CLAIMANT'S CERTIFICATION OF SERVICE PROVIDED I hereby certify that the above claim for services rendered is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services.  Signature of _____ Lisa Walker Griffith /S/ _____ Date 3/12/2024					
ATTORNEY CERTIFICATION					
22. CERTIFICATION OF ATTORNEY OR CLERK. I hereby certify that the services were rendered and that the transcript was received.  _____ Signature of Attorney or Clerk Robin M Earnest /S/ _____ Date 03/13/2024 14:14:20					
APPROVED FOR PAYMENT - COURT USE ONLY					
23. APPROVED FOR PAYMENT  _____ Signature of Judicial Officer or Clerk of the Court James E. Boasberg /S/ _____ Date 03/18/2024 06:27:09				24. AMOUNT APPROVED \$1,688.00	

**Voucher Services Detail**

Date	Service Type	Description	Incl. Page Numbers	No. of Pages	Rate Per Page	Apportioned	Adjusted	Total	Audit Amount	Audit Notes
3/12/2024	Original	transcripts requested		422	\$4.00	\$0.00	\$0.00	\$1,688.00		

**Voucher Expenses Detail**

No Expenses Reported

**Submission Notes**Public Notes

(No Notes)

Private Notes

(No Notes)